A Community Self Help Approach; Afghan Refugee Children in Pakistan

Phil Bartle, PhD
Eva Segerström

ABSTRACT:

Where there is a very large refugee population, as in Pakistan, outside resources are limited, even for providing essential survival items (eg food, shelter and water). The provision of psychological services for children therefor must necessarily tap the most important available resource; the refugees themselves. Techniques of community development [*social animation*] were modified for this purpose. Reaching children through training for community action promotes a communal self reliance process.

A BRIEF HISTORY:

Pakistan hosts the world's largest refugee population, Afghans and their families who are theologically and politically opposed to the socialist regime in Kabul. They settled mostly in camps and villages in the North West Frontier Province (NWFP) and Baluchistan. The first refugees came in 1976, but the big influx started after the Russian supported regime took power in 1979. The population is difficult to estimate (the figure 3.5 million is often mentioned) because births and deaths are not recorded. Families owning ration books obtained on arrival (up to 10 or 12 years ago) keep the same registration no matter how the family size may change.

Pakistan has not signed the UN Convention on refugees. UNHCR therefor does not have full status, and maintains a "Mission" with a "Chief of Mission" in Islamabad. The largest UNHCR sub office in the world is in Peshawar (SOP). Pakistan recognizes Afghan refugees, but not others. The care and concern of the Afghan refugees is the responsibility of the Government of Pakistan (GOP) through its Commissioner for Afghan Refugees (CAR), which is also the major implementing agency for projects funded through UNHCR. There are also over a hundred NGOs in Peshawar and Quetta, many of whom receive partial funding through UNHCR for work with the refugees.

With the Geneva accord in 1988 and the withdrawal of the Russians, observers expected that the Kabul regime would fall and the refugees could repatriate. This has not happened. It is still impossible to predict how long Afghans will remain in Pakistan as the world's largest single refugee group. There is an unconfirmed suggestion that some of them prepare for "local **integration**" for which the Pakistan Government is not prepared (service costs will be immense). As fighting continues in various parts of Afghanistan, so-called "fresh arrivals," many needing medical attention and survival rations, continue to come to Pakistan. Since there is virtually no new registration of fresh arrivals, many international NGOs have been increasingly burdened with the added relief costs.

THE SITUATION:

Most of the children present in the camps were born in Pakistan. Some are unregistered and live in tents; some live in camps that look like ordinary villages. The society of Afghans includes concern and care for children, so their families meet most of their psychological and other needs. As long as food is available in each village, for example, the children will be fed. The community cares for them by whatever ways are known to the people.

Children born in the camps are not registered by the Pakistani government, so large numbers of children (most of those aged 11 or younger) do not have a recognized nationality or identity and, being unregistered, do not get Government of Pakistan rations.

Our surveys reveal that nine out of ten women wish to return if there were peace and means of livelihood, but their Islamic leaders oppose repatriation until an Islamic Government is established in Kabul. While UNHCR assists repatriation through an "**encashment**" procedure (giving the equivalent of three months' supplies in return for turning in ration cards), the rate of return is slow, and opposed by the Mujahideen.

The Afghans have a tradition of self reliance. This is shown by the interchangeable use of "***refugee camp***" with "***refugee village.***" On arrival, agencies give the refugees tents to use as dwellings. Within months of each new "camp" being started, it becomes a "village" because the Afghans themselves then build houses out of locally available materials.

There is a range of situations regarding the psychological needs of the Afghan refugee children. For example, through disease or genetics, several children are mentally retarded or hampered in other ways. There is very little community expertise or experience with their needs.

War-traumatized children are along that range of situations. Because fighting continues inside Afghanistan, there are many "fresh arrivals" of refugees not registered by CAR, and often include children who are in shock by seeing their homes and relatives bombed. Some of the children traumatized by the war appear to their community as mentally retarded. These children tend to be neglected and under-stimulated, mainly because of ignorance that something can be done with and for them.

There is a range of religious ideologies, but the refugees live in communities characterised by fundamentalist Islam. Programmes must be sensitive to cultural issues, particularly those related to women.

In Afghan society, in the refugee villages, very few children are consciously neglected or exploited, a positive consequence of conservative Islamic ideology combined with traditional values still in practice. As long as there is food in the camp, no child will starve; they suffer from ignorance (eg malnutrition, disease) and poverty (of the whole community).

Although UN and non governmental agencies provide relief for the refugees, the large number makes it impossible for agencies to care for all the needs. There are no available psychological services. The only practical solution is a community based self help approach.

THE RÄDDA BARNEN PROGRAMME IN PAKISTAN:

From 1983, Rädda Barnen was a donor to UNHCR, first providing social workers to SOP (Sub Office Peshawar) and SOQ (Sub Office Quetta) then, through a Trust Fund arrangement, increasing the support to cover operating costs and local staff support. The identification of vulnerable refugees was the main task of those social workers, but the size of the refugee population alone made it impossible for two Swedish social workers to practice social work.

In 1987, on the recommendation of the Rädda Barnen Social Worker in UNHCR, the Social Welfare Cell (SWC) of CAR was created. Its purpose was to create a cadre of social workers (Pakistani civil servants) who would:

» identify vulnerable refugees for special support,
» coordinate the field activities of various agencies, and
» promote self help activities.

UNHCR funded the operation of CAR/SWC, and monitor it through Social Services Unit of SOP, the Rädda Barnen Social Worker acting as a Programme Officer.

Rädda Barnen was to provide the training for these field workers, who were from various occupational backgrounds, by establishing a training unit (RBTU). The training unit would be administered by UNHCR/SOP because Rädda Barnen did not have accreditation needed to implement projects in Pakistan.

In 1989 Rädda Barnen made some changes. It sent a Team Leader, still working through UNHCR, to establish Rädda Barnen as an independent agency in Pakistan, obtain the necessary accreditation, and establish a field office. These were completed by the end of 1990. The training unit (RBTU) is now funded and administered directly by the Rädda Barnen field office.

The "***triangle***" of this programme (developed in this way) therefor included:

a. the Government of Pakistan (GOP/CAR/SWC), which provided the field workers (called District Coordinators),

b. the UN High Commission for Refugees (UNHCR/SOP/SSU) Social Services staffed by Rädda Barnen (to direct and monitor the process), and

c. The Rädda Barnen Training Unit (RBTU) to encourage, motivate and train the Pakistani field workers (and later train and stimulate Afghan refugee volunteers directly).

District Coordinators established ***"social welfare committees"*** in the camps. Committee members are ***"community volunteers."*** The unit trained community volunteers by seminars on different topics to increase social competence. One topic is why it is important to work with children with special needs, mostly mentally retarded. Another topic has been physical disability. In each seminar, one part has been on the UN Convention on Child Rights.

All important decisions are made in the committee. Without involvement of a committee many organisations fail in carrying out a project. The refugee village administration participates in the activities.

The components of community development are:

- The community itself defines the needs (objectives),
- The resources come from the community,
- Internal resources may be supported by external,
- Decision making is democratic,
- The approach is "bottom-up," and
- Activities should be of interest to the whole community.

When talking about "self help" that means we are working through community development and that the community itself is a resource.

A similar programme was proposed for Quetta in Baluchistan but UNHCR officials rejected the suggestion, so the Rädda Barnen Social Worker was withdrawn and Rädda Barnen efforts concentrated in Peshawar where now over 150 social welfare committees have been established in about 250 camps throughout the Northwest Frontier Province (NWFP).

SOME CONSTRAINTS:

The GOP/CAR/SWC District Coordinators did not have Social Work or Community Development backgrounds, and had quite varied skills and potentials needed to learn how to do the required field work. Most of them did not know what social or community work was before they began with SWC. The SWC District Coordinators were Pakistani, because GOP could hire only Pakistanis. GOP/CAR/SWC hired no Afghans.

UNHCR is a relief organization, not a development organisation. Numerous glitches appeared in getting this (developmental, not relief) process operational. UNHCR/SOP is set up to fund and monitor projects implemented by other agencies, so to implement and administer the training unit from within SOP was awkward. Cash flow problems constituted the major constraint.

UNHCR understanding and support has been mixed. Encouragement and support came from TSS in Geneva, and the Chief of Mission in Islamabad. The head of SOP, who supported it during the planning stages, left Peshawar just as the programme was being set up. The subsequent local UNHCR/SOP administrators were sceptical, and not supportive during the formative stages.

Since then, new senior UNHCR/SOP staff have arrived in Peshawar, and they provide good support and understanding.

Other officials, including SOP Territorial staff, GOP officials (District Administrators and other departments of CAR) were also sceptical. They appeared to be threatened by a process that involved target group (refugee) participation in their own development.

These constraints meant that education was needed for the administrators (not only for the refugees) to explain the purpose and process of this approach. They could be convinced only by demonstrated practical results.

THE ACHIEVEMENTS:

Because this programme has a community based approach, it must be seen as a process. Unlike in a project which has a finite measurable objective, the social process itself is the achievement. Several indicators, nevertheless, indicate that the process is under way.

Since the methods used were adopted from traditional community development techniques, various "hardware" achievements usually associated with them can be mentioned. Roads, latrines, shallow wells, for example, were built with local self-help labour. Reflecting the conservatively islamic culture, mosques were built, and a few waiting rooms for ladies (observing "purdah") were constructed adjacent to basic health units (BHUs). These are fortunate bi-products of the real purpose of the programme (a social process).

Other measurable results concern the non-hardware results. The number of trainers trained (3) and assistant trainers trained (4), the number of SWC district coordinators trained (27) since mid 1988, and the number of district coordinators currently active in the camps (20). Seminars for government civil servants, other NGOs and UN staff about the objectives and techniques of community participation were held; 281 persons received up to 8 days each.

The training of community volunteers began later, late 1989. The most important among those are volunteers now running the child support groups. Over 280 training days, 108 community volunteers (14 females) received 5 to 20 days each. Other volunteers have been trained as trainers (promoters) for social welfare committees. Over 51 training days, 122 members received 5 to 10 days each. On request, the training unit has also trained volunteers for special child health-related activities, including EPI (extended programme of inoculation), and the tuberculosis programme. Volunteers were trained for other international NGOs for the identification of vulnerable groups as recipients of income generation and vocational training projects. Over 49 training days, 185 community volunteers (including 68 females, received 1 to 5 days each. Volunteers are trained in community animation techniques, the UN Child Convention, and children's general and special needs.

Another fortunate bi-product of the process is that now a 70 year old refugee volunteer is teaching English to 25 students. Volunteers speak on EPI and similar topics during friday prayers at mosques. There are many examples.

Community self help "**Child Support Groups**" (groups for children with special needs; our prime target) composed of adult refugees who have had training from RBTU, engage in many activities in support of children's needs. These include stimulation, rehabilitation, emotional support, and assistance to children with various special needs. Seventeen such groups are now running, and another nine more will be fully functioning by the end of 1991. The training unit provided a big box with training material to trained community volunteers who want to start a group. A deaf Afghan boy made a doll.

The first child group began in January, 1990, with eight children. Today the same group has twenty four children, divided into two. Two more community volunteers act as leaders. One special committee planned a playground, using local resources, labour and material. A physiotherapist associates with the group and the playground is also in his interest (for his training).

In one camp where there is a child group, the committee decided to construct a house. They asked Rädda Barnen to pay for it. That would have been an easy and quick solution, but would produce the wrong effect. Eventually money came from unknown givers, and community volunteers supplied the labour. The house is theirs and they are very proud of it.

Females run four groups of children. In addition, 42 mothers were trained. The requests for female training are increasing. That makes us happy because (as in all other societies) the females are closer to the children.

In measuring achievements, it must be repeated that the objective of the training unit was not the training of skills or imparting of information, but the stimulation of communal self help action in the refugee villages. The training is a means to that end.

While the ultimate target group of the training of volunteers to run child groups, were infants up to age six or seven, or retarded and disabled children, other training of volunteers was aimed at older children. In a child-to-child approach, "***Islamic Khetmatgar***" groups were formed. These were originally school-based children's clubs, somewhat similar to boy scouts, aimed at getting the children to help run the schools. The training unit aim has been to promote the formation of many more of those groups, and expand their scope to include child-to-child activities outside the schools, including hygiene education, involvement of disabled children, introduction of traditional Afghan games, and learning about Afghan local and national traditions. These have been now established in about sixty refugee schools.

The most significant indicator of the value of this approach is the number of requests coming from "***maliks***" and other male leaders of other camps and villages to send more animators. Many other international NGOs and agencies has floundered on the hard rocks of extremely conservative islamic values. Because of pressure from donors, many of these agencies tried to set up programmes for women, and immediately clashed with conservative forces in the camps. By starting with the male leaders, and taking a communal self help approach to assistance to children with special needs, the training unit and those it trained found that men in the camps soon asked for training of their women to help the children with special needs. In contrast to the scepticism in the early stages, the training unit can now no longer keep up with the requests (although this has not been an equal demand from all camps).

An interesting conceptual development has also occurred. These refugees see themselves as fighting a "***jihad***" against the Kabul regime. But the word "***jihad***" is not all violence. The promoting of good works, social work on behalf of their own children and the vulnerable of their communities, is also called a "***jihad.***"

For some remote areas having populations from upwards of 600,000 refugees, twenty animators are selected for twelve month training (giving them scholarships), to support self help activities and to coordinate NGOs that have problems working in those remote areas. The training includes some preparation for repatriation and cross border activities, and has a similar focus as the training of community volunteers.

In the second quarter of 1991, a new development appeared. Trained community volunteers began organizing themselves. One group has selected a board. Their objective is to advocate for the needs of disabled children, to give support and encouragement to each other, and to share and develop their experiences. In one camp, the volunteers have established a centre from where they present themselves to aid organizations that come to the camp. The idea has already spread to other camps and groups of community volunteers. RBTU has agreed to support these organized groups of volunteers, as it reflects that the community process is under way, and is constructive.

LESSONS LEARNED:

The programme of training for community action is an effective way to develop human resources in a refugee community, where the refugees themselves are their own greatest resource.

A practical approach, and concrete results, must be set as clear objectives, and seen as results, for this process to survive and grow.

The training unit had one marketing project in embroidery and it failed. One reason for the failure was probably lack of involvement from the social welfare committee. Another reason, we believe, is that social workers should stay away from commercial projects.

In all training, the trainees must be supported and encouraged to formulate how they will use the training for practical purposes in their lives. It is not a theoretical or academic education.

A community based approach is "messy" in that planning is more difficult, actions are slower to implement, results are more difficult to quantify and the process is less easy to measure, than in a relief or service provision approach. This is a social process rather than a finite project.

Scepticism by local administrators, some planners, and many administrators of agencies set up for relief rather than development, comprise the biggest constraint to developing such a process.

Once such barriers are overcome, we recommend this approach as the most practical, action effective and cost effective approach to providing many services, including meeting the psychological needs of refugee children.

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